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sion, and the nurses who accept these positions are adding a greater one. On the other hand, I believe in helping out in the family household in an emergency in any way that we wish to, the suggestion of help always coming first from the nurse.

In my years of private nursing I have met all classes and sorts of people and have heard a great many remarks and, strange as it may seem, you can always make the patient or family see a remark or story that they have been told in another and a right light. Take, for instance, Dr. Richard Cabot's remark on nurses telling in their idle moments or hours about some exciting operation. If Dr. Cabot or any of us would say, when such complaints are made, "Well, don't you think it is well to know a little about the other side of life? You see, knowing these things sometimes helps us to live a more normal life ourselves, and perhaps help the community we live in and in so doing lessen these exciting operations," in nearly every case the person will take this view of the gossip and profit by it. There is always a great deal more pleasure in turning evil into good than good into evil just as pleasure in virtue far exceeds that of vice.

To go back to the suggestion of fewer hospitals and care of the sick, I should advise that some of the thousands that are used in maintaining the hospitals be spent on building sanitary tenements and homes, and in so doing we would not only have better tenements to look at, but better health and comfort for those living in them, and during sickness they could be taken as well, and I believe better, care of in their own homes under the proper conditions than in the hospital, and not cost the community as much, but while we continue to have these numerous hospitals all over the country, let us insist on more maids being employed in the hospitals.

M. J. W., R.N.

TYPHOID IN PREGNANCY

DEAR EDITOR: I want to ask through the JOURNAL for the experience of nurses who have had patients with typhoid who were pregnant women. In cases that did not abort, had blood tests been made to determine whether or not it was typhoid? I should be glad of any recent statistics on this subject.

Indiana.

E. B., R.N.

WAS SHE RIGHT?

DEAR EDITOR: In the September issue of the JOURNAL there was an admirable account of the way a nurse, on vacation, handled an emergency maternity case, in which the patient was taken with violent hemorrhage but no pain.

The promptness and skill of her treatment must excite our admiration, and it seems invidious to question it in a single point, but was she right to give whiskey? She says, "One half-ounce of whiskey was given, and instantly vomited, followed by a moment of complete unconsciousness."

Would not the whiskey have been liable to increase the hemorrhage by relaxing the walls of the arteries? I have been taught that it should never be given in any case of hemorrhage, nor any other form of alcohol, and that it is especially contra-indicated in confinement cases because it tends to increase the difficulty of delivery. One of the leading obstetricians and gynecological surgeons of this city warned me against it most strongly, saying that he had known

it to be given with fatal result. I would like to hear what other nurses think about it.

The old idea that alcohol gives strength still largely holds, but is it right? Does it not merely make one unconscious of pain and discomfort by narcotic action?

It comes from the same chemical radical as chloroform and is its cousin in nature.

E. BERTHA BRADLEY, R.N.

Brooklyn, N. Y.

TRIALS OF THE ADVERTISER

DEAR EDITOR: I requested that you insert my "want ad" for a nurse in your journal twice, for the months of September and October. It has come out in the September issue and I am swamped with replies and applications for the position. The one insertion has done its work and I write to ask that it be not put in the October number, provided it does not inconvenience your arrangements. I had no idea of the efficacy of such advertisements. Applications have been coming in at the rate of two to four a day, and I am getting tired of answering them.

[A note from "G. F." cannot be printed as it is not accompanied by her name and address.—ED.]

NATURE AND TREATMENT OF CHOREA.—*The Medical Record* says: "Carey F. Combs, of Bristol, writes in the *Medical Press and Circular* with regard to the nature and treatment of chorea. According to his views chorea is an organic disease implicating the cells of the cortex cerebri, and those of the midbrain and pontomedullary nuclei to the less severe degree. It is due to the action of rheumatic toxins upon these cells. All parts of the cortex suffer equally, and, therefore, the disease should not be regarded as one of motion only. In spite of its extraordinary persistence, due to repetition of active phases, the general tendency is toward recovery. Combs is of the opinion that treatment should consist in the removal of the cause, active rheumatic infection, by rest in bed with administration of salicylates during the active stages; prolonged mental and bodily rest during convalescence; improvement of general health by fresh air, full diet, and tonics, quieting of excessive movement by sedative drugs or packs; and cure of paresis by massage."